PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10016478

CLAIMS AS FILED - PART I					SMALL ENTITY			ITITY	OTHER THAN				
			(Column	1)	(Column 2)		! .	TYPE		OR	SMALL	ENTITY	
ТО	TAL CLAIMS							RATE FEE			RATE	FEE	
FO	3		NUMBER	FILED	NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
то	TAL CHARGEA	BLE CLAIMS	3 mir	nus 20=	*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS				nus 3 =	*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zer				ero, ente	r "0" in c	olumn 2		TOTAL	370		TOTAL		
CLAIMS AS AMENDED - PAR					TII			عدد القيا			OTHER	THAN	
	a	(Column 1)		(Column 2) (Column 3)				SMALL E	ENTITY	OR	SMALLE	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	* 3	Minus	** 7	30	=		X\$ 9=		OR	X\$18=		
AME	Independent	*)	Minus	***	3	=		X42=		OR	X84=		
لــــا	FIRST PRESE	NTATION OF M	JUIPLE DE	PENDEN	CLAIM		J	+140=		OR	+280=		
TOTAL										OR	TOTAL		
			ADDIT. FEE		JO	ADDIT. FEE							
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	ו ר		ADDI	1		400	
ENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	T C1 A114	-	4	X42=		OR	X84=	٩	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						4	+140=		OR	+280=		
l l										OR	TOTAL		
		(Caluman 4)			ADDIT. FEE			ADDIT. FEE					
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	٦,		4001	l		A 500	
ENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	*	Minus	###		=		X42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT						╽	+140=			+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
** If the entry in column 1 is less than the entry in column 2, write "U in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

Application or Docket Number

1

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1.				<u></u>														
		CLAIM		D - PART I			o			L ENTITY		~ ~		ER T				
lr	TOTAL CLA	IMS	1 (COII	(Column 1) (Column 2)			31	TYPE		<u>_</u>		OR 1	SMAI	LL EN	1TIT			
	TOTALOD							RAT	re fe		E		RATI	E	FEE			
	FOR	····	NUME	BER FILED	NUN	ABER EXTRA		BASIC		370.	00	OR	BASIC F	EE 7	40.0			
L	TOTAL CHAR	IGEABLE CLAII	MS (_	.ก.กบร 20=	1.	Y /		X\$ 9=		OF		OR	X\$18:	= _				
1	NDEPENDEN	IT CLAIMS		minus 3 =	<u> </u>		X42=				OR	X84=	1					
	MULTIPLE DE	PENDENT CLAI	IM PRESENT					+140	=			OR	+280=		-			
•	If the differe	nce in column	1 is less than	less than zero, enter "0" in column 2				TOTA	,Ľ			O''L OR	TOTAL					
	CLAIMS AS AMENDED - PART II								OTHER THAN									
		· (Column		(Column 2) (Column 3)										ENT				
ENTA	Beet Control of the Control	CLAIMS REMAININ AFTER AMENOMEI	G	HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	•	ADDI- FEE			RATE	TIC	DDI- DNA EE			
2	Total		Minus	***		=		XS 9=		_	OF)R	X\$18=					
AMENDM ENT	Independen		Minus	***		=		X42=	1			R	X84=					
_	FIRST PRE	SENTATION OF	MULTIPLE D	EPENDENT	CLAIM]	1.10	1		7		200	1				
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	•						A	TOTAL DDIT. FEE	1			R AC	TOTAL DIT. FEE					
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	Independent	. 73	Minus	3		= 10		X42=	4	(21)	OF	,	X84=	/				
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							L				OF		TOTAL					
		•					ADI	TOTAL DIT. FEE	<u> </u>		OR	ADI	OIT. FEE					
		(Column 1)		(Column	2) (Column 3)		•					•		· •			
T		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	F	RATE .	TIC	DDI- DNAL EE	·	F	RATE	ADI TION FE	(JAN			
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ı	ndependent	* /	Minus	*** /-	3 =	=	X	42=	\neg		~	 	(84=	1				
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•							+	40=	1		OR	+2	280=		[
f ti	he entry in colur	nn 1 is less than ti nber Previously Pa	he entry in colur	mn 2, write *0*	in colunss than 2	nn 3. 10, enter "20."		TOTAL T. FEE			OR	400	TOTAL IT. FEE					
ef e	he "Hinhest Nur	nber Previously Pa	aid For IN THIS	S SPACE is le	ss than 3	3, enter "3."			·~·									
Th	e Highest Num	ber Previously Pai	ia hou (local oc	independent)	S UPC IN	grest minuel h	AL E	· aic eth	· Opri	are box	4. ω				1			